



## RECYCLED WATER DISCHARGE REPORT

Unauthorized Discharges Less than 50,000 Gallons  
(Submit within 5 days of incident)

Date of Incidence:_____	Submission Date:_____ (internal use only)
Customer Name:	
Property Address:	Recycled Water Use Permit #:
Description of unauthorized discharge incident (include length of time between discovery and repair):	
Estimated quantity of recycled water discharged:	Did the discharge enter into a waterway or storm drain? <input type="checkbox"/> Yes <input type="checkbox"/> No
Location of discharge incident:	
Actions taken (include repairs made, any broken/replaced equipment, and personal performing repairs):	

Are any further actions necessary to complete repairs? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, describe:	
Date of last inspection by City staff:	Date of last Self-Monitoring Report submission:
<p align="center"><b>Site Supervisor Signature</b></p> <p>I certify under penalty of law that this document was prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. I am aware that there are penalties for submitting false information, including the possibilities of fines and/or disconnection of recycled water service.</p> <p>_____ Date:</p>	
Print Name	Phone #:

Submit this form to the Recycled Water Program:

Drop off: 3333 Busch Rd, Pleasanton

Electronically: [jcordes@cityofpleasantonca.gov](mailto:jcordes@cityofpleasantonca.gov)

Fax: 925-931-5595

If you have any questions, call 925-931-5515

(For internal use only)

Received by: \_\_\_\_\_

Date: \_\_\_\_\_